

Rec'd PCT/PTO 28 MAR 2005




United Plaza, Suite 1600
30 South 17th Street
Philadelphia, PA 19103

Telephone: +1-215-568-6400
Facsimile: +1-215-568-6499
www.volpe-koenig.com

BRINGING LAW TO YOUR IDEAS

mail@volpe-koenig.com

FACSIMILE COVER SHEET

TO: PCT BranchFAX NO.: 703-305-3230FROM: Robert J. Ballarini; Registration No. 48,684 

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Svein Myhre

Application No.: 10/501,119**Confirmation No.:** 5693**Filed:** July 12, 2004

For: METHOD FOR PROVIDING A HINGED
GUARANTEE CLOSURE, A HINGED
GUARANTEE CLOSURE AND CONTAINER
WITH A HINGED GUARANTEE CLOSURE

Group: 3727**Examiner:** Not Yet Known**Our File:** ZNA-PT006**Date:** March 28, 2005**VIA FACSIMILE****TO 703-305-3230**

Enclosed are:

- 1) A Request For Corrected Filing Receipt, 2 pages;
- 2) A marked-up copy of the Filing Receipt, 2 pages; and
- 3) A copy of the Declaration and Power of Attorney, 2 pages.

Comments:

**NOTIFY DIANE THATCHER IF TRANSMISSION IS NOT COMPLETE OR
LEGIBLE.**

I hereby certify that this paper is being transmitted via facsimile to 703-305-3230 at the United States
Patent and Trademark Office on March 28, 2005.



Diane Thatcher

March 28, 2005
Date

Patents

Trademarks

Copyrights

Trade Secrets

Litigation

Licensing

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****In the PATENT APPLICATION of:****Svein Myhre****Application No.: 10/501,119****Confirmation No.: 5693****Filed: July 12, 2004****For: METHOD FOR PROVIDING A HINGED
GUARANTEE CLOSURE, A HINGED
GUARANTEE CLOSURE AND CONTAINER
WITH A HINGED GUARANTEE CLOSURE****Group: 3727****Examiner: Not Yet Known****Our File: ZNA-PT006****Date: March 28, 2005****VIA FACSIMILE****TO 703-305-3230****REQUEST FOR CORRECTED FILING RECEIPT**

Mail Stop PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a marked-up copy of the Filing Receipt for the above-identified patent application. Upon proofing, it was noted that the Filing Receipt is incorrect. There are three changes that need to be made.

The Power of Attorney is incorrectly listed as Robert Ballarini. Attached is a copy of the Declaration and Power of Attorney showing that Power of Attorney is to Customer No. 3624.

With respect to the title, please insert a comma between "closure" and "a" as indicated.

With respect to the title, please delete "clossure" and insert therefor --closure.--

Applicant: Svein Myhre
Application No.: 10/501,119

Applicant respectfully requests that a corrected Filing Receipt be issued.

Respectfully submitted,

Svein Myhre

By 

Robert J. Ballarini
Registration No. 48,684
(215) 568-6400

Volpe and Koenig, P.C.
United Plaza, Suite 1600
30 South 17th Street
Philadelphia, PA 19103

RJB/dt
Enclosures (2)

CFK
DT

UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/501,119	07/12/2004	3727	664	ZNA-PT006	6	29	4

RECEIVED

AM/PM

CONFIRMATION NO. 5693

3624

VOLPE AND KOENIG, P.C.
UNITED PLAZA, SUITE 1600
30 SOUTH 17TH STREET
PHILADELPHIA, PA 19103

FEB 16 2005

FILING RECEIPT



OC000000015028335

VOLPE & KOENIG, P.C.

Date Mailed: 02/10/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Svein Myhre, Sandefjord, NORWAY;

Power of Attorney:

Robert Dallerini-40004

THE PATENT PRACTITIONERS ASSOCIATED
WITH CUSTOMER NUMBER 3624

Domestic Priority data as claimed by applicant

This application is a 371 of PCT/NO03/00015 01/17/2003

Foreign Applications

NORWAY 20020277 01/18/2002

Projected Publication Date: To Be Determined - pending completion of Security Review

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

DOCKETED FOR

3/18/05- REQ. CORRECTED Filing RPT

CLOSURE

Method for providing a hinged guarantee closure a hinged guarantee ~~closure~~ and container with a hinged guarantee closure

^
)**Preliminary Class**

220

**LICENSE FOR FOREIGN FILING UNDER
Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15**

GRANTED

The applicant has been granted a license under 35 U.S.C. 184, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" followed by a date appears on this form. Such licenses are issued in all applications where the conditions for issuance of a license have been met, regardless of whether or not a license may be required as set forth in 37 CFR 5.15. The scope and limitations of this license are set forth in 37 CFR 5.15(a) unless an earlier license has been issued under 37 CFR 5.15(b). The license is subject to revocation upon written notification. The date indicated is the effective date of the license, unless an earlier license of similar scope has been granted under 37 CFR 5.13 or 5.14.


This license is to be retained by the licensee and may be used at any time on or after the effective date thereof unless it is revoked. This license is automatically transferred to any related applications(s) filed under 37 CFR 1.53(d). This license is not retroactive.

The grant of a license does not in any way lessen the responsibility of a licensee for the security of the subject matter as imposed by any Government contract or the provisions of existing laws relating to espionage and the national security or the export of technical data. Licensees should apprise themselves of current regulations especially with respect to certain countries, of other agencies, particularly the Office of Defense Trade Controls, Department of State (with respect to Arms, Munitions and Implements of War (22 CFR 121-128)); the Office of Export Administration, Department of Commerce (15 CFR 370.10 (j)); the Office of Foreign Assets Control, Department of Treasury (31 CFR Parts 500+) and the Department of Energy.

NOT GRANTED

No license under 35 U.S.C. 184 has been granted at this time, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" DOES NOT appear on this form. Applicant may still petition for a license under 37 CFR 5.12, if a license is desired before the expiration of 6 months from the filing date of the application. If 6 months has lapsed from the filing date of this application and the licensee has not received any indication of a secrecy order under 35 U.S.C. 181, the licensee may foreign file the application pursuant to 37 CFR 5.15(b).

Express Mail Label No. 442787641 US

Please type a plus sign (+) inside this box → 

PTO/SB/01 (12-97)

Approved for use through 8/30/00. CMB 0351-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	ZNA-PT006
	First Named Inventor	
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method for providing a hinged guarantee closure, a hinged guarantee closure and container with a hinged guarantee closure

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **01.17.2003** as United States Application Number or PCT International Application Number **PCT/NO03/00015** and was amended on (MM/DD/YYYY) **02.12.04** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 385(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
20020277	NORWAY	01.18.2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450.

Please type a plus sign (+) inside this box →



PTO/SB/01 (12-97)

Approved for use through 8/30/00. OMB 0851-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number

3624

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

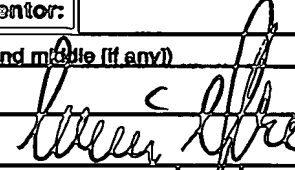
Direct all correspondence to: ☒ Customer Number
or Bar Code Label

3624

OR ☐ Correspondence address below

Name	VOLPE AND KOENIG, P.C.				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:						<input type="checkbox"/> A petition has been filed for this unsigned inventor
Given Name (first and middle (if any))	Svein					Family Name or Surname
						MYHRE
Inventor's Signature						Date
						08.06.2004
Residence: City	SANDEFJORD	State		Country	NORWAY	Citizenship
						Norwegian
Post Office Address	Båtstangveien 187, N-3230 Sandefjord, Norway					
Post Office Address						
City		State		ZIP		Country

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.